

X  
JG  
2/10  
ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-T	913	1/26 02/09/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
= ..... Allowed I ..... Interference  
- (Through numeral)... Canceled A ..... Appeal  
-+ ..... Restricted O ..... Objected

Claim	Date
Final	2/10
Original	6/15
5	6/03
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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15	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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Best Available Copy